

## ARTICLE 4

### SECTION 4

#### MINOR CONSENT SERVICES

##### 1. GENERAL

A child may apply for Medi-Cal without parental consent or knowledge in order to receive minor consent services. This section identifies the types of services available to the child applicant and describes procedures for the processing of minor consent applications.

##### 2. MINOR CONSENT SERVICES

Minor Consent Services are categorized by age as follows:

###### UNDER AGE 12:

- pregnancy & pregnancy related care
- family planning services
- sexual assault services

###### AGE 12 YEARS AND OLDER:

- sexually transmitted diseases treatment
- drug and alcohol abuse treatment/ counseling
- mental health outpatient care
- pregnancy & pregnancy related care
- family planning services
- sexual assault services

Methadone treatment, psychotropic drugs, convulsive therapy, psycho-surgery, and sterilization are excluded from the services which a minor may receive without parental consent.

##### A. Outpatient Mental Health Treatment and Counseling

Minors requesting outpatient mental health treatment and counseling must submit a statement from a mental health professional: licensed marriage, family and child counselor; licensed clinical social worker; licensed psychologist; or psychiatrist which states that the child (minor) is mature enough to participate intelligently in the mental health treatment or counseling and is one of the following:

- 1) In danger of causing serious physical or mental harm to self or others without mental health treatment or counseling; or
- 2) An alleged victim of incest or child abuse.

The MC 4026 does not have to be completed each month indicating that the minor is eligible for outpatient mental health services. The minor consent case may be approved each month that is covered in the statement provided by the mental health professional indicating the length of the treatment plan. The MC 4026 is only required each time a new statement from the mental health professional is needed. However, as in all minor consent cases, children receiving minor consent services are required to report changes

that may impact their eligibility to their worker in person each month that they need minor consent services. The case must be approved each month and a notice of action (NOA) must be issued. The MC 239V NOA should be used on all minor consent cases.

Medi-Cal will pay for mental health treatment or counseling services, defined as "the provision of mental treatment or counseling on an outpatient basis." This does **not** include **inpatient services** under any circumstances.

B. Other Services

A child applying for minor consent services related to pregnancy or family planning, drug or alcohol problems, sexual assault, or venereal disease must complete form MC 4026 to indicate the need for minor consent services. If the minor consent applicant refuses to complete form MC 4026, the application is to be denied.

C. Verifications

Minor consent applicants are not required to provide any identification or their Social Security Number for eligibility. In addition, the minor consent applicant is exempt from the requirement to verify pregnancy. If the minor is employed, they must provide pay stubs. Bank account statements are required if they own a bank account and have access to the information.

The minor consent applicant is not required to verify the need for minor consent services except for mental health services as indicated in 2.A above. The applicant's signature on form MC 4026 will be accepted as verification of the need for all other minor consent services.

The MC 4026 is a two-part NCR form. The worker is to give the top copy to the applicant and keep the second copy in the case file.

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3. APPLICATION PROCESS

A. Who May Apply

Persons under 21 years of age who are defined as adults under Article 1, Section 1, are not eligible for minor consent services and should be processed for full-scope Medi-Cal.

Although all minor consent cases are confidential, the parents' knowledge of their child's circumstance in no way affects eligibility for minor consent services, and no contact shall be directed to the parent(s) or guardian(s). A minor must apply for minor consent services, their parent(s) can not apply on their behalf. However, one parent may accompany a minor to apply for minor consent services when there is a need or desire to maintain confidentiality with the other parent. The confidentiality requirement is not waived in this situation.

B. Application Process

Applicants for minor consent are required to go through the normal preapplication, orientation, and intake procedures for the initial month's eligibility determination. An MC 13 must be completed for non-citizens. "Section B: Scope of Benefits Requested" should have the box "Other" checked and "Minor Consent Services" written on the blank line. Application procedures for subsequent months are outlined in E.2 below. The statement of citizen/national status and place of birth on the MC 210 (8/01) is sufficient for citizens/nationals.

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NOTE: At the initial intake, and when an annual redetermination would be required, a new MC 210 and 219 must be completed. If a break occurs in the monthly reapplication for minor consent services, a new MC 210 and MC 219 must be completed.

1) Application will be processed

The application for minor consent services will be processed when the child applicant is one of the following:

- a) Currently included in an MFBU which has a share of cost; or
- b) Part of a family not currently receiving Medi-Cal; or
- c) Excluded from an existing MFBU; or
- d) An ineligible member of an existing MFBU.

2) Application will not be processed

The application for minor consent services will not be processed in the following situations:

- a) When the applicant is under twelve years of age and applying for services related to drug and alcohol abuse treatment/counseling, a sexually transmitted disease, or for mental health outpatient care, the worker will deny the application.
- b) When the minor consent applicant is currently eligible for Medi-Cal in a public assistance case or an MFBU which has no share of cost, the applicant will be referred to the worker who is assigned the active case for the issuance of an immediate need card. In this situation, no entry is to be made in the case narrative.
- c) If a minor is covered under a Managed Care plan, the minor should be referred back to the plan for treatment. There is no need to open a Minor Consent case in this situation **unless the minor is requesting drug/alcohol abuse or mental health treatment, or the minor's Managed Care identification card is in the parents' possession and the health plan refuses to provide services without viewing such identification.**

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C. Applicant Not Living With Parents

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A minor must be considered living in the home with his/her parents to be eligible for minor consent services. If they are away temporarily, i.e., school/college, they are considered living in the home. If the minor is living temporarily with another relative or friend they are considered living in their parent(s) home if their parent(s) are legally and financially responsible for the minor, i.e.; minor is claimed as a dependent for income tax purposes.

If a public agency has legal responsibility for a minor, he/she is not eligible for minor consent services. If a minor is a Seriously Emotionally Disturbed (SED) child, they are considered living in the home in regard to determining Medi-Cal eligibility. A SED child may apply for minor consent services. However, minor consent Medi-Cal will not cover mental health treatment or counseling that is required by the child's Individual Educational Plan (IEP), whether the SED child is in 24 hour care or a day treatment program.

D. Minor Consent and Immigration Status

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Any minor consent applicant who states that he/she is not legally present in the United States will be denied benefits. However, the worker may not request verification of any child's immigration status if the child claims to have legal resident status but does not have easy access to such verification.

A Systematic Alien Verification for Entitlements (SAVE) check **shall not** be submitted for minor consent services.

E. Period of Eligibility

The period of eligibility for minor consent services begins on the first day of the month of application and continues through each successive month in which the applicant completes form MC 4026 (except for outpatient mental health cases) indicating a need for minor consent services. In addition to completing form MC 4026 each month, the minor consent applicant must also continue to meet all other eligibility requirements for Medi-Cal. The worker will use the MC 4026 to determine if the minor consent applicant continues to meet Medi-Cal eligibility requirements.

1) Initial Certification

When the worker determines that the applicant is eligible for minor consent services, he/she will approve the application for one month only and will give the applicant manual NOA MC 239V in the office. The worker will indicate on the NOA that the application is approved for one month only as the application is for minor consent services. The worker will enter MEM sections 50147.1 and 50703(d) as the regulations supporting the action. The worker will issue a limited service card in the office as specified in Article 14, Section 2.

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2) Ongoing Certification

When the worker determines that the child applicant will need minor consent services in the month(s) following the month of initial approval, the applicant must be told to contact either the same intake worker who processed the initial application or a worker designated by the district office to process ongoing minor consent cases. The intake worker will encourage the applicant to make the contact as early as possible in the following month to request ongoing minor consent services. If the applicant contacts the appropriate worker to request ongoing minor consent services at any time during the month of granting or the month following discontinuance, the applicant will be given an appointment with that worker for a face-to-face interview to complete form MC 4026. If the worker determines that the applicant is still eligible for minor consent services. MEDS will be updated to reflect eligibility.

F. Minor Consent Medi-Cal Card

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Minor consent beneficiaries receive a paper ID card that is good for one year from the date of issuance. Workers are not to issue a new card when a minor reapplies for minor consent services unless it has been 12 months since the last date of issuance, or if the card is lost.

Eligibility for minor consent services must be verified through the POS network. When verifying eligibility providers will get a limited services message that identifies which service(s) the minor is eligible too.

G. Other Health Coverage

Workers shall not report other health coverage (OHC) information for children who are applying for minor consent services when the minor is included in his/her parents MFBU and the child's parent(s) have other health care coverage. The OHC code must be removed from the minor's paper card. If the minor has his/her own health care coverage through his/her employer or other source, put the OHC code on the minor's paper card.

If an immediate need care is being issued to the minor based on the parent's Medi-Cal case and the minor has an OHC code on MEDS, the worker will submit a 14-28 requesting the MEDS Operator to use an EW15 transaction which will immediately remove the OHC code for that individual. This will avoid any situation in which the Health Insurance System (HIS) will reassert the OHC prior to the minor receiving the limited service they are seeking. The worker will have to submit another 14-28 to have the OHC reentered prior to the next month's eligibility on MEDS, assuming there is no further need for a limited service.

H. Retention of the Minor Consent Case

Discontinued minor consent cases that have been identified as probable ongoing minor consent cases will be retained by the intake worker, held in a central file, or forwarded to

the designated minor consent worker in accordance with district policy. The closed case will be held until the end of the month following the month of discontinuance. The case will then be forwarded to Records Library if the child did not request ongoing minor consent services during that month. The child will be required to reapply through the normal application process if he/she requests minor consent services at any time after the end of the month following the month of discontinuance.

I. Confidentiality

Minor consent applicants have the right to apply for and receive minor consent services without the consent or knowledge of their parents. Therefore, it is important that the minor's involvement with DSS be kept confidential.

1) Social Security numbers

Workers will enter zeros in the Social Security number field of the 278 LM document in order to protect the identity of the minor consent applicant. When zeroes are entered in the Social Security number field of the 278 LM document, MEDS will automatically assign a pseudo number.

2) Address

Workers will enter the district office address on line "D" of the 278 LM document. This will further protect the identity of the child and ensure that no automated NOAs are mailed to the child's residence.

4. MINOR CONSENT AID CODES (effective September 1997)

Minor consent applicants must specify on the MC 4026 the type of coverage for which they are seeking. Workers will use the following aid codes for Minor Consent cases with granting actions taken after the MEDS renewal date for September 1997 month of eligibility:

**7M**      **Restricted to minors who are at least 12 years of age**, limited to sexually transmitted diseases, drug and alcohol abuse, family planning, and sexual assault services. **This aid code is not to be used for any mental health service.**

This aid code is used for cases with or without a SOC.

**7N**      **Restricted to pregnant minors**, limited to pregnancy, pregnancy-related and family planning services. **This aid code does not have an age restriction.**

When a minor requests services related to pregnancy services, the unborn is included in the MFBU as an aided child. The maintenance need for two is used. Once the child is born, the mother must apply for full-scope Medi-Cal for the child if Medi-Cal coverage is desired for the child. There is no continuing eligibility for the minor's child under Minor Consent program. A new case must be established for the minor's child.

Pregnant minors are also eligible for the Income Disregard program if their income is at or below 200 percent of the federal poverty level (FPL). However, workers will not use aid code 44 for Minor Consent beneficiaries whose income is above the regular maintenance need level but under 200 percent of the FPL. **Any minor requests pregnancy, pregnancy-related and family planning services must be assigned aid code 7N.**

This aid code has no SOC. There is no aid code for Minor Consent pregnancy services with a SOC. The reason is that CDHS did not anticipate any pregnant minor under this program would have countable income in excess of 200 percent of the FPL, based on CDHS' records and a MEDS analysis.

**7P Restricted to minors who are at least 12 years of age,** limited to sexually transmitted disease, drug and alcohol abuse, family planning, sexual assault services, **and/or outpatient mental health treatment and counseling.**

This aid code is used for cases with or without a SOC.

**7R Restricted to minors under age 12** and limited to family planning, and sexual assault services. **This aid code cannot be used for mental health services, services for drug and alcohol abuse, or sexually transmitted diseases.**

This aid code is used for cases with or without a SOC.

#### 5. MULTIPLE MINOR CONSENT MFBUS/AID CODES

Any time a minor requests Minor Consent pregnancy services and services outside the scope of those provided under aid code **7N**. Two MFBUs with two aid codes will be established. In this situation, the **7N** MFBU for pregnancy services will have no SOC, the other MFBU with a different aid code for non-pregnancy services may or may not have a SOC depending on the applicant's countable income.

#### 6. CONFIDENTIALITY AND CHILD ABUSE REPORTING REQUIREMENTS

State law and regulations on minor consent services prevent the county welfare department from contacting the parents of a child applying for minor consent services only. **The Child Abuse Reporting Law** requires the county welfare department to report suspected child abuse to child protection agencies, law enforcement agencies, and agencies responsible for investigation of cases involving dependent children. County welfare workers will make reports as required by Penal Code Section 11166. However, such reports should not disclose the fact that the child has applied for Medi-Cal. When making a report, welfare workers may be required to include in their reports only the minimum, specifically-enumerated elements: name of the person making the report, name of the child, present location of the child, nature and extent of injury, and the fact that led the reporting person to suspect child abuse (e.g., "child stated she is pregnant and under the age of 14 years").

7. Health Insurance Portability and Accountability Act (HIPAA) Notice of Privacy Practices

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The HIPAA Notice of Privacy Practices must be provided to all individuals who are approved for Minor Consent services. This Notice must be included with the initial approval NOA. The worker must narrate in the case file that this notice was provided. For all other beneficiaries, the State Department of Health Services is able to send the notice through their automated system.